

496 Independent Expenditure Report

Type or print in ink.
Amounts may be rounded to whole dollars.

DECLERED 496 INDEPENDENT EXPENDITURE REPORT

NAME OF FILER Residents for Reform		Date of This Filing 10/16/2014	Date Stamp 2014 OCT 16	CALIFORNIA FORM 496 For Official Use Only
AREA CODE/PHONE NUMBER (714) 540-2295	I.D. NUMBER (if applicable) 1351756	Report No. 14-11		
STREET ADDRESS 601 E Alton Ave STE H//PO BOX 26, Balboa Island 92662		<input type="checkbox"/> Amendment to Report No. _____ (explain below)	OFFICE OF THE CITY CLERK CITY OF NEWPORT BEACH	
CITY Santa Ana	STATE CA			

1. List Only One Candidate or Ballot Measure

NAME OF CANDIDATE SUPPORTED OR OPPOSED Diane Dixon				NAME OF BALLOT MEASURE SUPPORTED OR OPPOSED			
OFFICE SOUGHT OR HELD City Council Member: Newport Beach	DISTRICT NO.	SUPPORT X	OPPOSE	BALLOT NO./LETTER	JURISDICTION	SUPPORT	OPPOSE

2. Independent Expenditures Made Attach additional information on appropriately labeled continuation sheets.

DATE	DESCRIPTION OF EXPENDITURE	AMOUNT
10/16/2014	CMP Cumulative to date total \$1109.89	1,009.89

Reason for Amendment: _____

FPPC Form 496 (March/2011)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)